

MPRRAC Meeting

September 15, 2017
9:00 AM – 12:00 PM

Facilitator – Lila Cummings

Presenter – Shane Mofford



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Agenda

Meeting Minutes Review

9:00 – 9:15 AM

2017 MPRRAC Recommendations -

Department Update and Stakeholder Feedback 9:15 – 10:15 AM

Break

10:15 – 10:30 AM

Year Three Schedule and
Process Improvements

10:30 – 11:45 AM

Next Steps

11:45 AM – 12:00 PM



Meeting Minutes Review



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2017 MPRRAC Recommendations



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MPRRAC Recommendations

The next three slides contain MPRRAC recommendations, also found in the [draft July 21st MPRRAC Meeting Minutes](#). For more information regarding the conversations that led to MPRRAC recommendations, see meeting minutes above.

Today:

- The Department will provide a brief update regarding considerations of MPRRAC recommendations.
 - Final Department recommendations will appear in the 2017 Medicaid Provider Rate Review Recommendation Report, submitted to the Joint Budget Committee and the MPRRAC on November 1st.
- Stakeholders are then invited to provide feedback regarding the MPRRAC's recommendations.



Physician Services and Surgery

MPRRAC Recommendation:

The optimal goal for physician services and surgery rates is parity with Medicare; however, given budgetary constraints, in the short term the MPRRAC recommends to rebalance rates at the budget-neutral benchmark and then adjust rates to 80% of Medicare.

Additionally, the Department should begin paying for physician services and surgery based on place of service, using Medicare as a model.



Anesthesia Services

MPRRAC Recommendation:

The Department should bring anesthesia rates from 131.64% of the benchmark to 100% of the benchmark.



Home- and Community-Based Services (HCBS) Waivers

MPRRAC Recommendation:

The Department should:

- Aim to pay rates that are aligned with the Department's new rate setting methodology, with special attention to services:
 - Identified by stakeholders through the rate review process; and
 - With the biggest gaps between current rates and rates developed via the new rate setting process.
- Continue using robust stakeholder engagement in the new rate setting process.
- Create rates that take client acuity into account.
- Create rates that work towards providing services in the least-restrictive and most cost-effective environment.
- Create rates that take into account which provider types are more subject to economic conditions, such as minimum wage.



Break



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Year Three Schedule & Process Improvements



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Adjustments to the Year Three Schedule

The [Rate Review Schedule](#) is found on the [MPRRAC website](#).

The Department plans to:

- review durable medical equipment (DME) in year four (instead of year three);
- review psychiatric treatment and Health and Behavior Assessment codes in year four (instead of year three);
- review all codes included in the Alternative Payment Methodology (APM) in year three (a brief explanation of the APM is provided on the following 8 slides and more information can be found via: <https://www.colorado.gov/pacific/hcpf/primary-care-payment-reform-3>);
- review family planning services in year three (instead of year four); and
- work with DentaQuest, the Department's administrative service organization (ASO), to conduct dental analyses in year three.



Primary Care

Alternative Payment Methodology

Delivery System Reform Team

9/15/17



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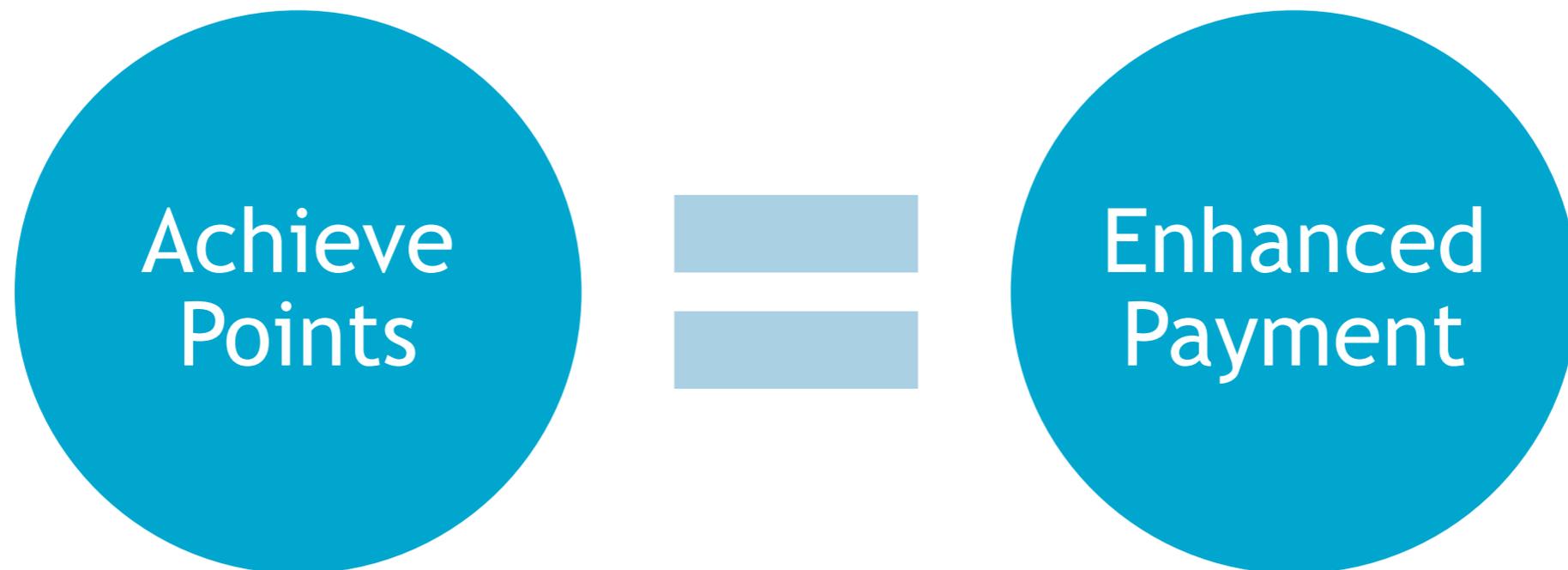
APM Goal



Provide sustainable, appropriate funding for primary care that rewards high value, high quality care.

Alternative Payment Methodology

How does it work?



Performance and Structural Measures

Self -
Reported
Structural
Measures

✓ 30 choices

Claims -
Based
Clinical
Performance
Measures

✓ 16 adult &
13 pediatric
choices

eCQM -
Reported
Clinical
Performance
Measures

✓ 10 adult &
4 pediatric
choices

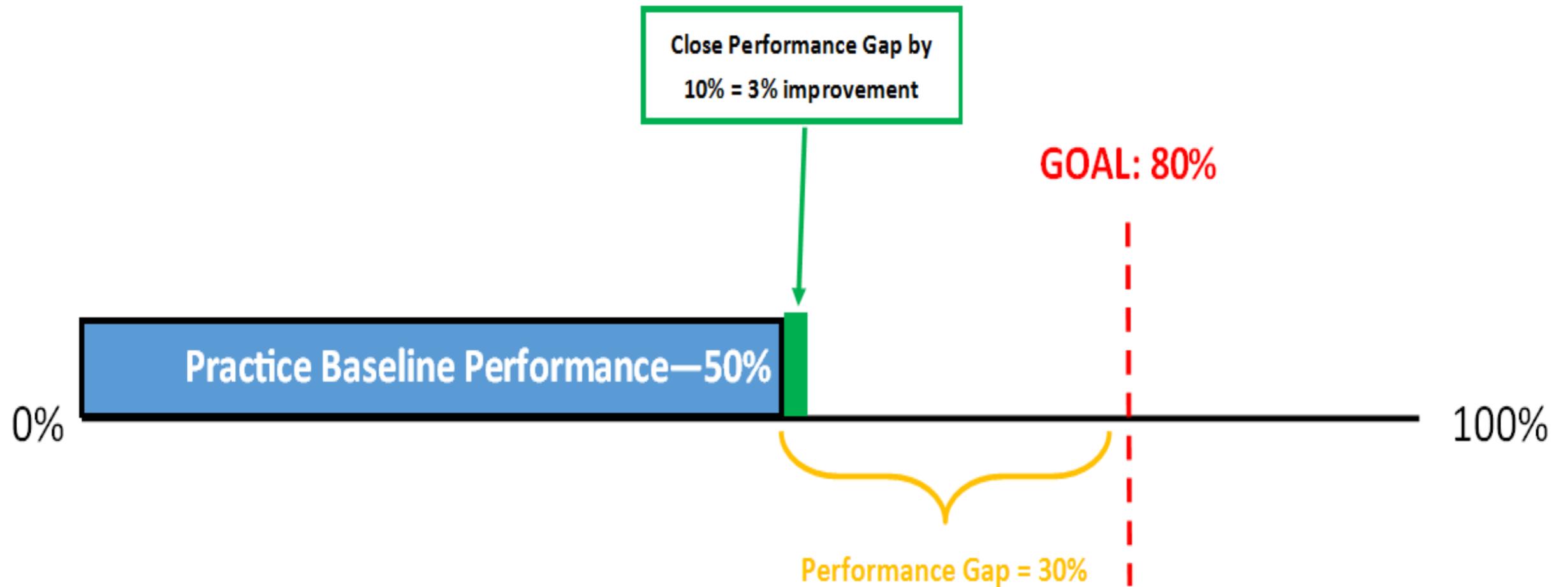
Goals

Measure Name	Measure Type	HCPF Goal
Adolescent Immunizations Combo 1	Claims	83.00%
Adolescent Well Visits	Claims	80.00%
Adult BMI Assessment	claims, eCQM	90.00%
Alcohol Use: Screening & Brief Counseling	eCQM	Report*
Appropriate Testing for Children with Pharyngitis	Claims	82.00%
Breast Cancer Screening	Claims	86.00%
Childhood Immunizations Combo 7	Claims	62.00%
Chlamydia Screening	Claims	62.00%
Colorectal Cancer Screening	Claims	60.00%
Controlling High Blood Pressure	claims, eCQM	70.00%
Depression Remission at 12 months	eCQM	Report*
Diabetes: A1c Test During Measurement Year	Claims	92.00%
Diabetes: Eye Exam	Claims	62.00%
Diabetes: Foot Exam	Claims	
Diabetes: HbA1c >9 (Poor Control) (INVERTED)	claims, eCQM	36.00%
Diabetes: Nephropathy Screening	Claims	93.00%
ED Utilization (per 1000)	Claims	
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	claims, eCQM	43.00%
Maternal Depression Screening	claims, eCQM	Report*
Medication Management for People with Persistent Asthma	claims, eCQM	50.00%
Prenatal and Post Partum Care	Claims	68.00%
Readmissions	Claims	88.00%
Screening for Clinical Depression & Follow-up Plan	eCQM	Report*
Suicide Risk Assessment for MDD	Claims	80%
Tobacco Use: Screening and Cessation Intervention	eCQM	Report*
Total Cost of Care	Claims	reduce 2%
Use of Imaging Studies for Low Back Pain	Claims	82.00%
Well Child Visits 15 months (6 visits)	Claims	80.00%
Well Child Visits 3-6 years	Claims	80.00%
Weight Assessment, Counseling for Nutrition & Physical Activity for children/adolescents	claims, eCQM	78.00%
		71.00%
		64.00%

Measure Name	Measure Type	HCPF Goal
Adolescent Immunization Combo 1	Claims	83.00%
Adolescent Well Visit	Claims	80.00%
Adult BMI Assessment	Claims, eCQM	90.00%



Close the Gap



Primary Care Payment Changes Over Time

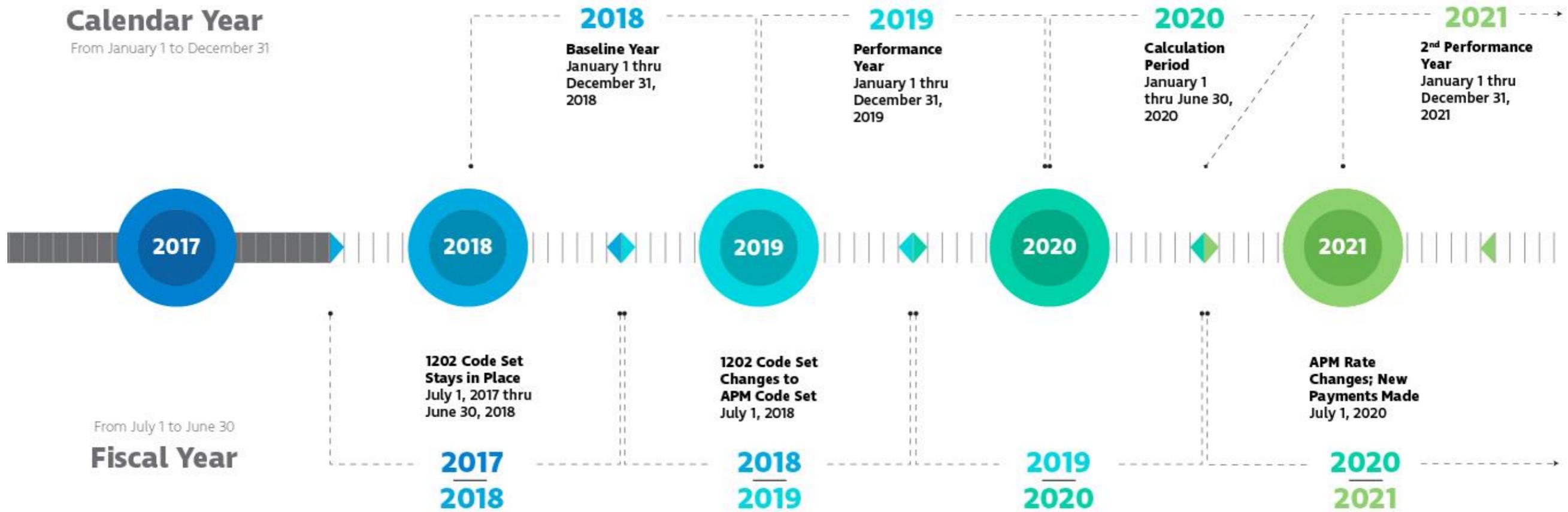
Fiscal Year	Event	High Performing Practices	If You Do Nothing	Excluded Practices (Low Volume)
FY 2016-2017	Current Year	100%	100%	100%
FY 2017-2018	No Change	100%	100%	100%
FY 2018-2019	Redistribution of 1202 Funds to APM Code set	101.10%	101.10%	101.10%
FY 2019-2020	No Change - Performance Measure Year	101.10%	101.10%	101.10%
FY 2020-2021	Payment Adjustment - 4.0% at risk	102.60*	97.10%	101.10%
FY 2021-2022	Payment Adjustment - 5.5% at risk	104.60*	95.60%	101.10%
FY 2022-2023	Payment Adjustment - 7.0% at risk	104.60+*	94.10%	101.10%
FY 2023-2024	Payment Adjustment - 8.5% at risk	104.60+*	92.60%	101.10%
FY 2024-2025	Payment Adjustment - 10.0% at risk	104.60+*	91.10%	101.10%





Alternative Payment Methodology

Calendar Year and Fiscal Year Timelines



Year Two Process Improvements

After year one, the MPRRAC suggested the Department:

- Share rate comparison data earlier than May 1st
 - The Department shared preliminary rate comparison data on November 18th, January 20th, and March 17th.
- Share more information about existing constraints, which may impact recommendations
 - The Department began providing feedback, regarding both existing constraints and proposed recommendations, in January 2017.



Proposed Year Three Process Improvements

In year three, the Department proposes changing from six MPRRAC meetings and three Rate Review Information Sharing Sessions (“deep dives”) to five MPRRAC meetings.

The proposed timeline changes could allow for:

- More efficient and effective use of MPRRAC and Department time.
- Potentially incorporating other data sources into the access analyses.



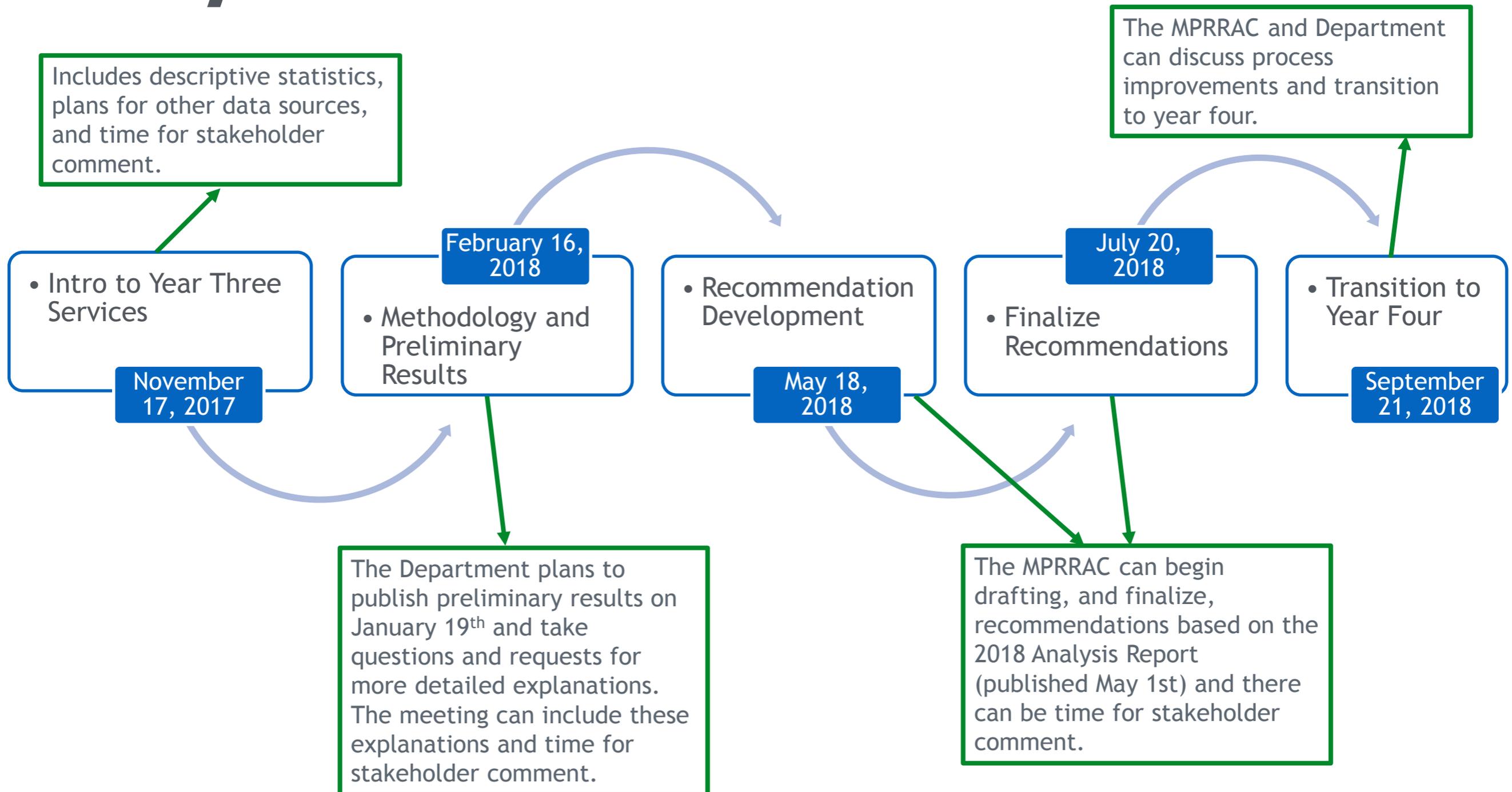
Proposed Year Three Process Improvements

More specifically, proposed timeline changes could allow for:

- More efficient and effective use of MPRRAC and Department time:
 - One MPRRAC meeting can be dedicated to detailed explanations of rate comparison and access analysis methodologies and preliminary results. Committee members and stakeholders can ask detailed questions for the services in which they are interested.
- Potentially incorporating other data sources into the access analyses:
 - By presenting all services at the beginning of the year and soliciting MPRRAC feedback, the Department will have time to gather additional data sources (e.g., surveys, focus groups, other databases).



Proposed Year Three Process Improvements



MPRRAC Committee Member Expectations

Tom Rose (MPRRAC Chair) and Lisa Foster (MPRRAC Vice Chair) will lead a discussion regarding expectations of MPRRAC committee members.



2017-18 MPRRAC Vice Chair Selection

Committee members will select the MPRRAC Vice Chair, to serve with Lisa Foster, who will become the MPRRAC Chair, for year three of the rate review process.



Next Steps



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Comments or Questions

- Contact Lila Cummings with additional questions between meetings: Lila.Cummings@state.co.us.

